

☒ Amendment ☐ New

AUTHORIZATION REQUEST FORM

South Carolina Department of Health and Environmental Control
Bureau of Solid and Hazardous Waste (803) 734-5200

☐ Landfill
☐ Recycle
☐ Landfarm
☐ Other
☒ Inc.
☐ Energy

Authorization Number: ST000014344

To be entered
by TSD Facility

O.H./Windsor
(Jim Bates)

Generator Information:

Generator ID # NJP000791236

Name USEPA Region II / Arkansas Chemical

Site: Foundry Avenue

Address Woodbridge Avenue

City Newark Edison

State NJ

Zip Code 08837

Official Contact Mark Pane

Title On-Scene Coordinator

Telephone (201) 906 - 6813

Treatment, Storage, or Disposal Facility Information:

SC County
(for In-State Generator Only)

Facility EPA ID # SCD044442333

Name ThermalKEM, Inc.

 Line # (This line # will always represent this specific waste stream.)

ACID LIQUID

Description of Hazardous Waste

Process Producing Waste:

Bulking of Compatible drums at CERCLA site.

D002 6666 0.2

EPA/DHEC Waste Codes

DOT Hazard Class

Enter Quarter for One-Time Disposal: / Qtr/yr.

Handling Method: I09

If Multiple Shipments Enter Frequency Here: 2-4 times/yr.

Volume: (lbs/yr. only) 20-30,000

Physical State of Waste @ 70°F

Flash Point (cc)

1. ☐ solid 2. ☒ liquid 3. ☐ N/A

1. ☐ N/A 2. ☐ <60°F 3. ☒ 60-140°F 4. ☐ >140°F

For DHEC Use Only:

Date Received

Notes:

CHEC 1969 Rev. (8/86)

433782



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AUTHORIZATION REQUEST FORM (con't)

This is
2. All
Hazardous
South CA
apply to
3. for
approval
question

Facility Use Only:

Amendment: Change to multiple shipments, 3-14-88 CWH

Packaging for Shipment: ☒ In Drums (size) 55 gallons ☐ In Bulk ☐ Other

Method of Transportation: ☐ Railroad tanker ☒ truck ☐ Other ☐ Specific Gravity: 1.25

Viscosity @ 70°F: ☐ Low ☒ Medium ☐ High Layering: ☒ None ☐ Bilayered ☐ Multilayered

Suspended Solids: % by weight or volume, Specify exact % 33.08 Dissolved Solids: by % weight, Specify exact % 17.6

Thousands of Btu's/lb, Specify: ☒ Organically Bound Sulfur (wt %): ☒ Organically Bound Chloride: ☒

Organically Bound Nitrogen (Wt %) 0.53 Toxicity: ☐ High ☒ Medium ☐ Low ☐ Unknown Ash %: ☒

Affinity for Water: ☒ Hydrophilic ☐ Lipophilic pH (if hydrophilic): < 1.0

Visual Description of waste: Not Known

Constituents: List specific constituents by name and corresponding percentage in waste stream.

Volatile Organics	%
None	

Non Volatile Organics	%
Phenols	0.174

Acid or Alkalis	%
None	

Salts & Inorganics	%
EP Toxic Metals	< 0.001
Total Solids	34
Nitrogen	0.53

Water: 60-65 %

AUTHORIZATION REQUEST FORM (con't)

Metallic: (total metals not EP Toxicity Test)

As <u>0.6</u> ppm	Cr ⁺³ <u>2.2</u> ppm	Ag <u><0.2</u> ppm	Fe <u>360</u> ppm
Ba <u><2.0</u> ppm	Cr ⁺⁶ <u>0.4</u> ppm	Ni <u>9.2</u> ppm	Sb <u>BDL</u> ppm
Cd <u>0.4</u> ppm	Hg <u>0.07</u> ppm	Cu <u>162</u> ppm	Mn <u>27</u> ppm
Pb <u>6</u> ppm	Se <u><0.1</u> ppm	Ti <u>BDL</u> ppm	Co <u>BDL</u> ppm
Zn <u>126</u> ppm	_____ ppm	_____ ppm	_____ ppm

Toxics:

Cyanide	<u>0.80</u> ppm
Pesticides	<u>None</u> ppm
Carcinogens	<u>None</u> ppm
Other Toxics	<u>None</u> ppm

Other Information : _____

Certification :

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

X Signature : Mark P. Pane

X Date Submitted : MARCH 9, 1988

X Print Name : MARK P. PANE

X Title : On Scene Coordinator

TSD Facility Certification :

I certify that based on the information presented in this document this facility is permitted to accept the waste stream described hereon, and do hereby inform the generator listed hereon of acceptance of the waste for treatment, storage, and/or disposal in the manner designated, and in compliance with the TSD Facility's standard terms and conditions.

Signature : Van Sanderfer

Print Name : VAN SANDERFER

Date Submitted : 3-16-88

Title : WASTE APPROVAL SUPERVISOR

ThermalKEM An American NuKEM Company

ThermalKEM Inc.
454 S. Anderson Road, BTC 532
Rock Hill, SC 29730
803/329-9690

Date: March 21, 1988

Mr. Mark Pane

USEPA Reg. II

Woodbridge Avenue

Edison, NJ 08837

Re: ST- 00001-4344

Generator: USEPA Reg. II/Arkansas Chem.

Broker: O.H. Materials

Approved for receipt at ThermalKEM,
Inc. after 3/16/88*

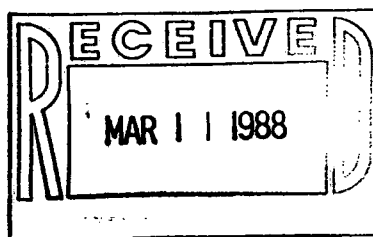
*Amendment

The South Carolina Department of Health and Environmental Control requires that TSD facilities return to the generator and/or broker a signed copy of the Authorization Request Form (ARF) for all waste streams accepted for treatment, storage, or disposal. Attached to this letter is a copy of the ARF for your records.

ThermalKEM, Inc.

Attachment

O.H. Materials Corp.
P.O. Box 41
Windsor, NJ 08561-0041
609-443-2800



OHM

March 9, 1988

Ms. Carla Hardister
Thermal Kem
454 South Andersen Rd.
Rock Hill, SC 19730

Dear Ms. Hardister:

Pursuant to our conversation on Monday, March 7, 1988, I am responding to your request for amendments to the ARF Application Numbers: ST-00001-4344 and ST-0001-4343.

As requested by O.H. Materials Corp., two additional changes were made to each authorization request form.

Please contact me in our New Jersey office at 609-426-4503 if you need additional information. Thank you for your help in securing the safe, proper disposal of this wastestream.

Sincerely,

A handwritten signature in cursive script, reading "James R. Bates".

James R. Bates
Disposal Manager

JRB:rmw